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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

PCT# 09/979586

Applicant:

DU TOIT et al.

Docket:

8436.88USWO

Title:

VARIABLE PHASE SHIFTER

## CERTIFICATE UNDER 37 CFR 1.10

'Express Mail' mailing label number: EL669945315US

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I hereby certify that this paper or fee is being deposited with the United States Postal Service 'Express Mail Post Office To Addressee' service under 37 CFR 1.10 and is addressed to the Commissioner for Patents, Washington, D.C. 20231.

By:

Name: Chris Stordahl

## BOX PATENT APPLICATION

Commissioner for Patents

Washington, D.C. 20231

Sir:

We are transmitting herewith the attached:

- ☒ Transmittal sheet, in duplicate, containing Certificate under 37 CFR 1.10.
- ☒ National Stage PCT Patent Application: Spec. 23 pgs; 72 claims.  
The fee has been calculated as shown below in the 'Claims as Filed' table.
- ☒ 14 sheets of formal drawings
- ☒ An unsigned Combined Declaration and Power of Attorney
- ☒ A check in the amount of \$2312.00 to cover the Filing Fee
- ☒ Other: PTO Form 1390; Preliminary Amendment, Marked-up Copy of Claims, Abstract; PCT/ISA/210; PCT/IPEA/416; PCT/IPEA/409
- ☒ Return postcard

## CLAIMS AS FILED

| Number of Claims Filed       |   | In Excess of: |   | Number Extra |   | Rate  |   | Fee       |
|------------------------------|---|---------------|---|--------------|---|-------|---|-----------|
| Basic Filing Fee             |   |               |   |              |   |       |   | \$1040.00 |
| Total Claims                 |   |               |   |              |   |       |   |           |
| 72                           | - | 20            | = | 52           | x | 18.00 | = | \$936.00  |
| Independent Claims           |   |               |   |              |   |       |   |           |
| 7                            | - | 3             | = | 4            | x | 84.00 | = | \$336.00  |
| MULTIPLE DEPENDENT CLAIM FEE |   |               |   |              |   |       |   | \$0.00    |
| TOTAL FILING FEE             |   |               |   |              |   |       |   | \$2312.00 |

Please charge any additional fees or credit overpayment to Deposit Account No. 13-2725. A duplicate of this sheet is enclosed.

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(PTO TRANSMITTAL - NEW FILING)